



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Guy Krippner et al.
Application No. : 10/088,282
Filed : July 22, 2002
For : ANTIVIRAL AGENTS

Examiner : Hong Liu
Art Unit : 1624
Docket No. : 150070.402USPC
Date : May 19, 2004

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO RESTRICTION REQUIREMENT
AND ELECTION OF SPECIES

Commissioner for Patents:

In response to the Office Action dated March 26, 2004, please extend the period of time for response one month, to expire on May 26, 2004. Enclosed are a Petition for an Extension of Time and the requisite fee.

In the outstanding Office Action, the Examiner has entered a three-way Restriction Requirement as follows:

Group I – Claims 1-23 and 26 directed to compounds of formula (1) and one method of using such compounds selected from method claims 27-33;

Group II – Claims 1-13, 24, 25 and 33 directed to compounds other than the compounds of formula (1) and their process of making; and

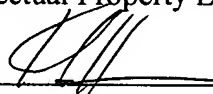
Group III – Claims 27-33 directed to the methods of using the compounds other than the compounds of formula (1).

Applicants hereby elect, without traverse, the Group I claims – that is, claims 1-23 and 26 directed to compounds of formula (1), and the method of claim 28. Of course, Applicants reserve the right to continue prosecution of the non-elected subject matter in one or more divisional applications.

The Examiner has also required Applicants to elect a single species for purpose of initial examination. To that end, Applicants elect the species of Compound No. 50.

In view of the above comments, consideration of the elected subject matter is respectfully requested.

Respectfully submitted,
Seed Intellectual Property Law Group PLLC

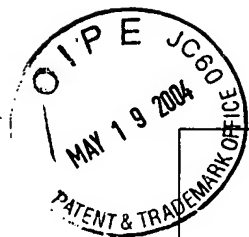


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TRANSMITTAL FORM (To be used for all correspondence after initial filing)	Application Number	10/088,282
	Filing Date	July 22, 2002
	First Named Inventor	Guy Krippner
	Art Unit	1624
	Examiner Name	Hong Liu
	Attorney Docket No.	150070.402USPC

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> CD(s), Number of CD(s) _____
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> After Allowance Communication to Technology Center (TC)
<input checked="" type="checkbox"/> Amendment/Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Declaration	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Information Disclosure Statement; Form PTO-1449	<input type="checkbox"/> Statement under 37 CFR 3.73(b)	<input type="checkbox"/> Additional Enclosure(s) (please identify below): _____ _____ _____
<input type="checkbox"/> Cited References	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53		
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Individual Name	Karl R. Hermanns	Customer Number 00500
Signature		
Date	May 19, 2004	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	_____	
Signature	_____	Date: _____

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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